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Amendment Under 37 C.F.R. § 1.116
Group Art Unit 1756, Expedited Procedure

In re Application of:

NOBUYOSHI SUGAHARA, ET AL.

Application No.: 10/629,751

Filed: July 30, 2003

For: BLACK TONER WITH DEFINED
LOSS TANGENT

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment After Final Action in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below

| CLAIMS AS AMENDED | | | | | | |
|--|--|-------|--|-------------------------|------------------|-------------------|
| | (2) CLAIMS REMAINING AFTER AMENDMENT | | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | * 2 | MINUS | ** 21 | = 0 | x \$25 \$50 | \$0.00 |
| INDEP. CLAIMS | * 1 | MINUS | *** 3 | = 0 | x \$100 \$200 | \$0.00 |
| Fee for Multiple Dependent claims \$180°/\$360 | | | | | | \$0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT— | | | | | | \$0.00 |

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- Verified Statement claiming small entity status is enclosed, if not filed previously.
- A check in the amount of \$ _____ is enclosed.
- Charge \$ _____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

- A check in the amount of \$ _____ to cover the fee for a _____ month extension is enclosed.
- A check in the amount of \$ _____ to cover the Information Disclosure Statement fee is enclosed.

Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Peter Saxon
Attorney for Applicants
Registration No.: 24,947

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200

NY_MAIN 523386v1



Amendment Under 37 C.F.R. § 1.116
Group Art Unit 1756, Expedited Procedure

02910.000071.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
NOBUYOSHI SUGAHARA, ET AL.) : Examiner: Christopher D. Rodee
Application No.: 10/629,751) : Group Art Unit: 1756
Filed: July 30, 2003) :
For: BLACK TONER WITH DEFINED) :
LOSS TANGENT) : September 12, 2005

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AFTER FINAL ACTION

Sir:

(a) Introductory Comments

In response to the outstanding Office Action dated July 18, 2005, kindly amend the subject application as follows.